尸检

照片

编译者

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约翰·F·肯尼迪
（1917年5月29日-1963年11月22日）

（2010 年）

警告本材料包

含令人不安的图像。

本材料由各种未经核实的来源汇编而成，并按汇编者收到的格式呈现，仅供学术参考

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介绍

请注意：

以下材料在视觉上令人不安,并且不反映任何编译者的个人意见或深奥的观点。

它按原样呈现,仅供学术参考

美国第三十五任总统约翰·肯尼迪于下午 12:30 遇刺
1963 年 11 月 22 日星期五,中部标准时间（UTC 18:30）,德克萨斯州达拉斯的迪利广场。
他在与妻子杰奎琳一起乘坐总统敞篷轿车时被枪杀身亡。



上图为肯尼迪总统和夫人杰奎琳,以及德克萨斯州州长约翰·康纳利和夫人在总统专车内,摄于刺杀事件发生前几分钟

枪击事件发生后,肯尼迪被送往达拉斯的帕克兰医院,但未能挽救他的生命。后来,肯尼迪的遗体被送往华盛顿特区,并于 1963 年 11 月 22 日（肯尼迪遇刺当天)在当时的马里兰州贝塞斯达海军医院进行了尸检。尸检开始于晚上 8 点左右,结束于午夜（美国东部标准时间）。

关于肯尼迪遇刺事件的猜测很多,阴谋论层出不穷。以下材料包含一组据称来自肯尼迪尸检的照片;然而,“官方”尸检照片从未发表过,并继续被封存在国家档案馆。

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照片

头部外伤



上图为肯尼迪未受伤的头部一侧



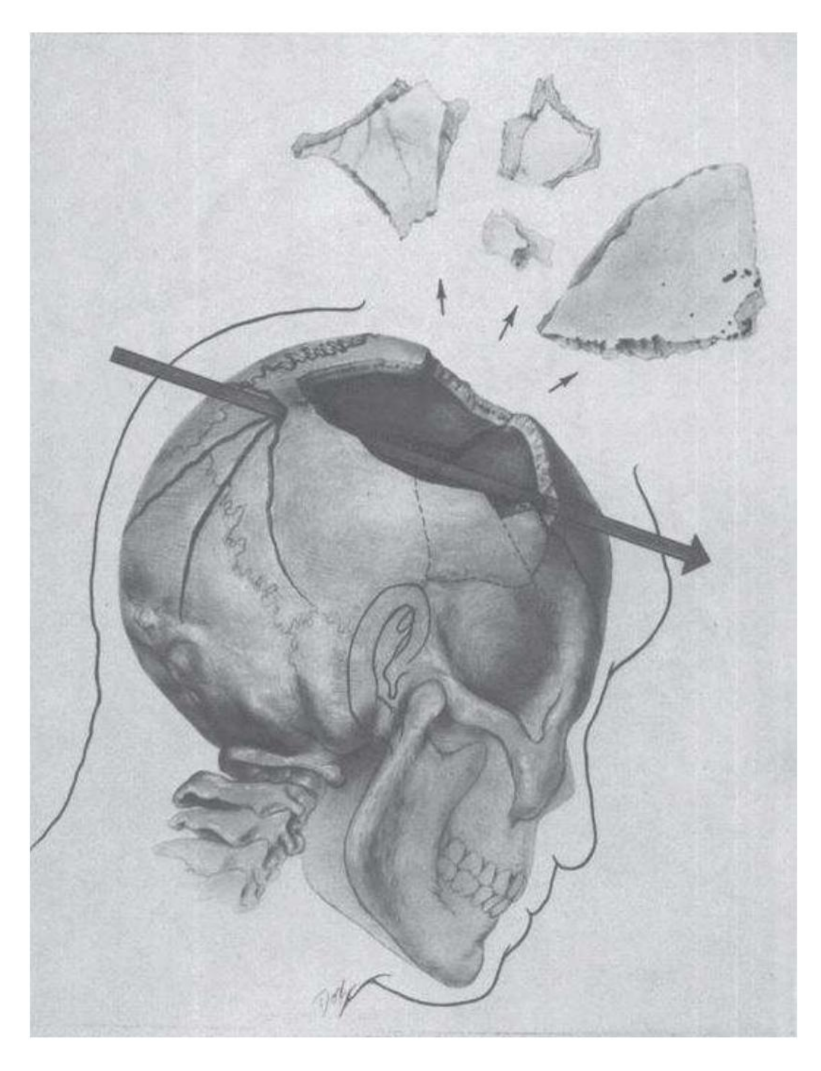
肯尼迪的头顶和后脑勺受伤。
可以看到血液和脑物质。



上图 – 肯尼迪的头顶和后脑勺受伤。
可以看到血液和脑物质。



上图为尸检期间拍摄的肯尼迪总统头部照片。
可以看到血液和脑物质。



上图显示了导弹穿过肯尼迪头骨的可能轨迹。
头骨碎片未按比例绘制。由医学插画家 Ida G. Dox 制作

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X 射线

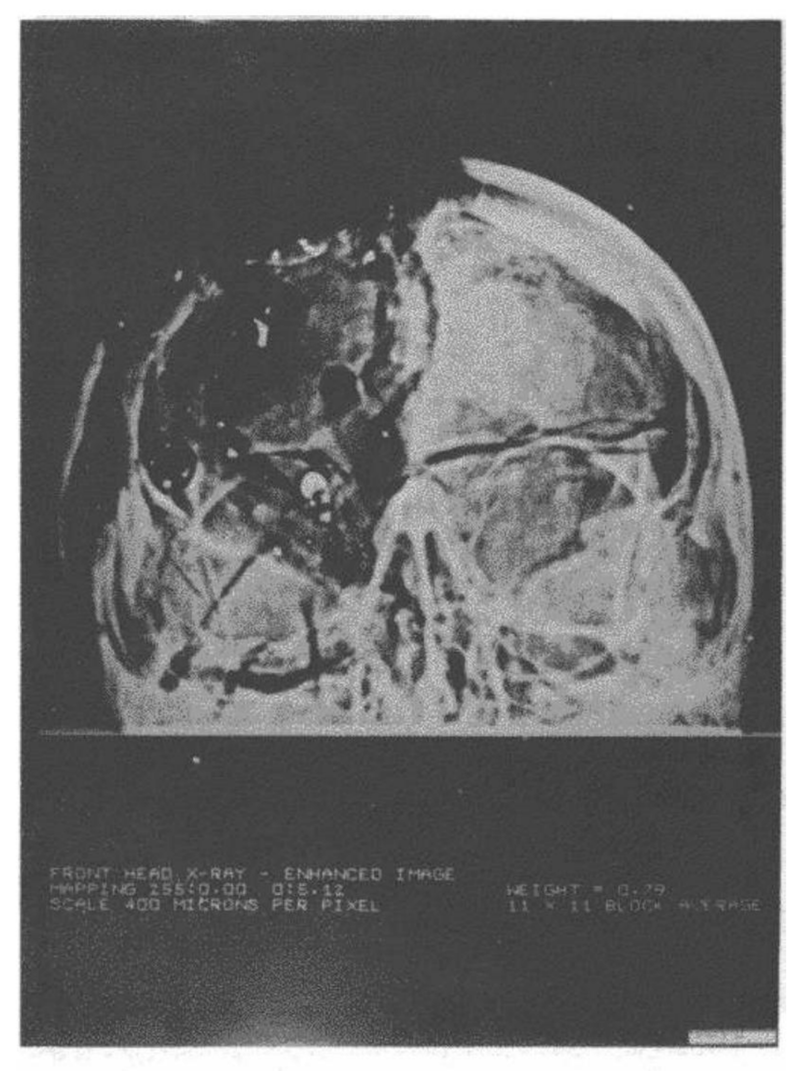
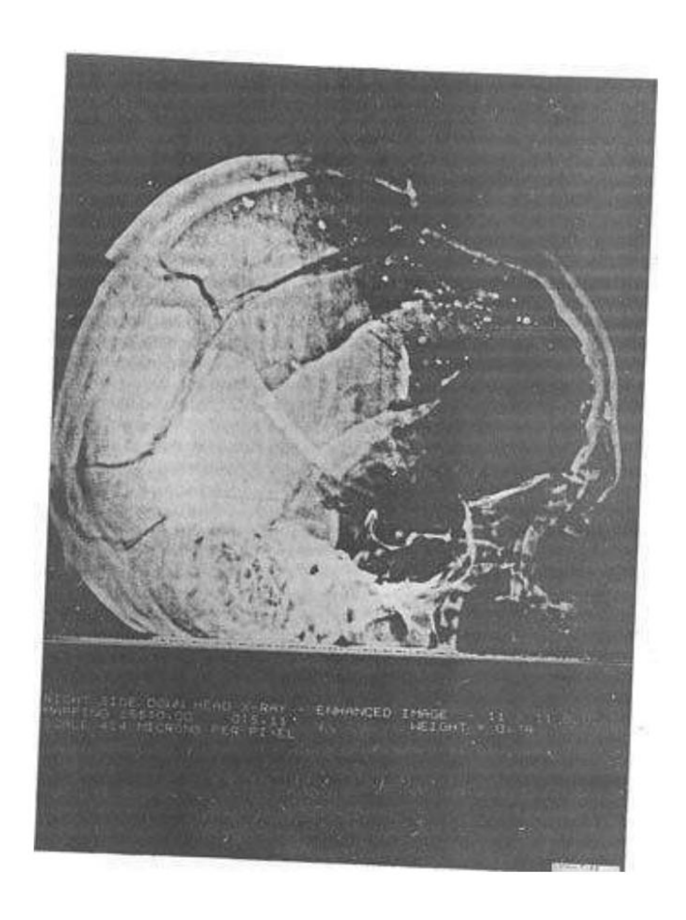
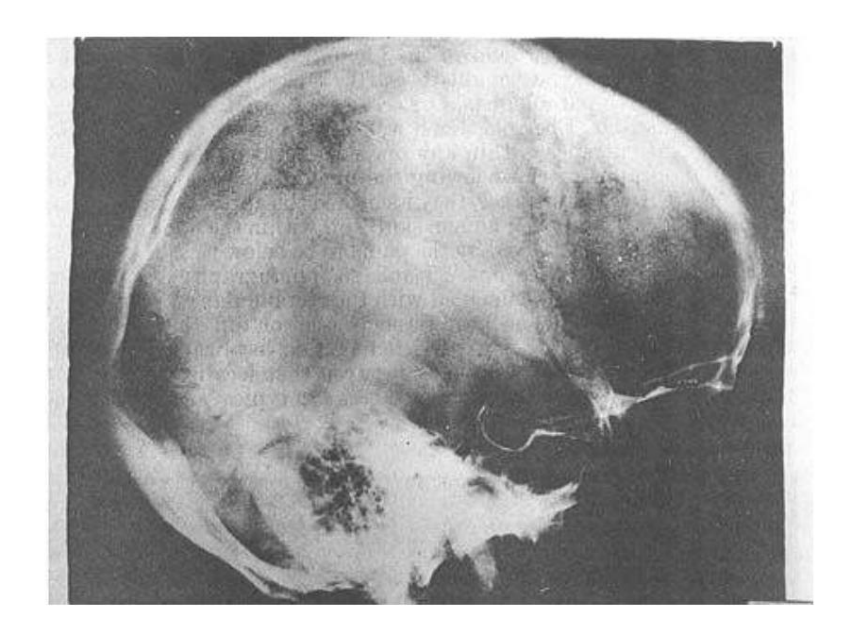


FIGURE 19.—Photograph of a computer-assisted image enhancement of anterior-posterior X-ray of the skull (autopsy X-ray No. 1).

上图为肯尼迪头骨的 X 光正面图


HEAD X-RAY - ENHANCED IMAGE
MICRONS PER PIXEL
WEIGHT





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大缺陷



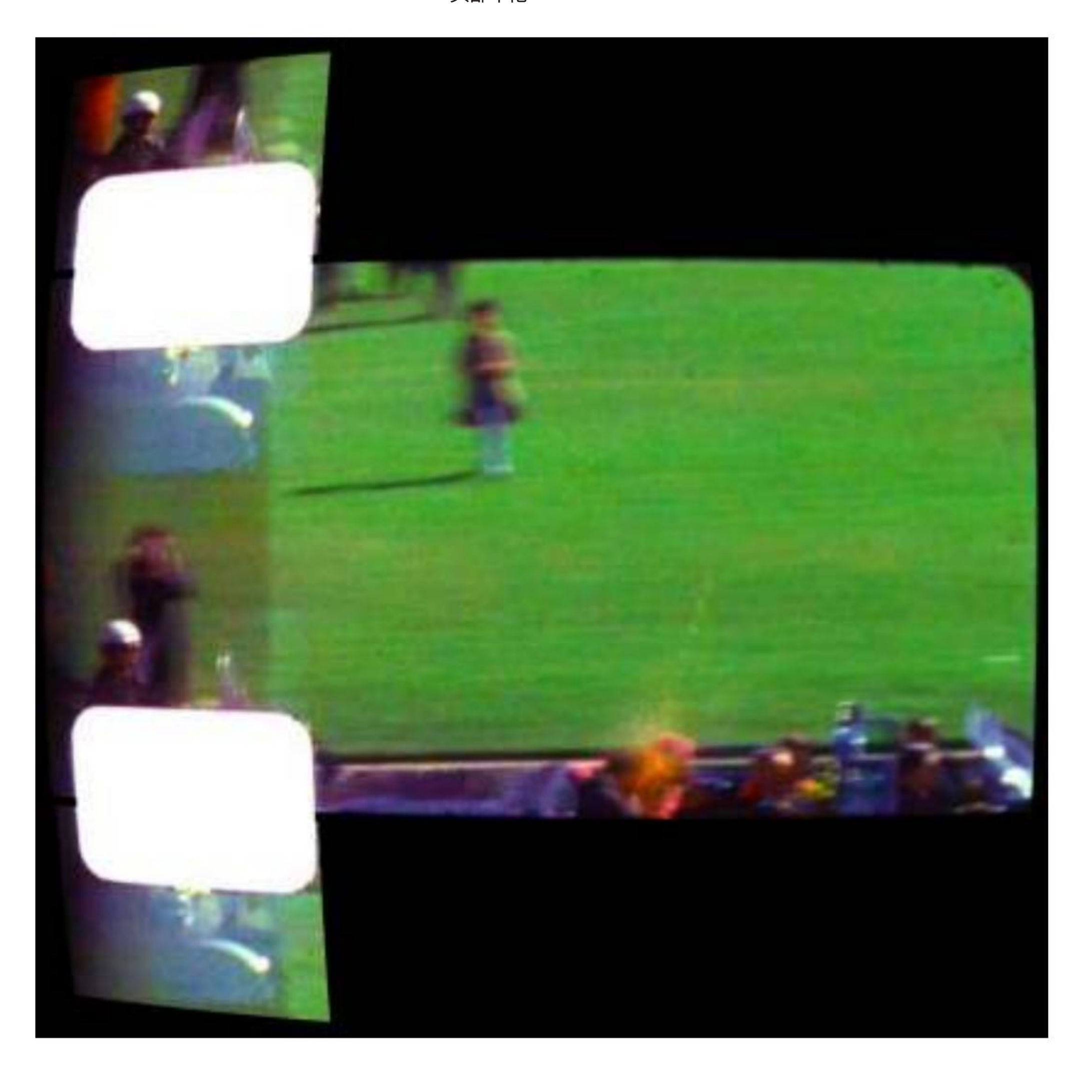


以上 - 较大的缺陷



上图为大型缺陷细节

头部中枪



上图为 Zapruder 胶片的画面。
“爆头”

头部受伤的证词

“当他躺在后脑勺上时，头部的伤口很难看清。然而，当他们随后将他的脸移向左侧时，可以看到右后顶骨、枕骨被炸出一个大洞，大小和我拳头一样，直径为 2.5 英寸。大脑、大脑部分已被炸出，而且小脑从伤口中伸出。这显然是从右后方耳朵后面炸出的伤口。右枕骨区域有一个洞，大小和我拳头一样。” （查尔斯·克伦肖医生，帕克兰医院外科医生）

“我们把他包起来了……我看到他的整个头……那里没有头发……都被吹走了。
他的部分头部被炸飞，脑浆掉落在担架上。” （多丽丝·纳尔逊，帕克兰医院急诊室护士

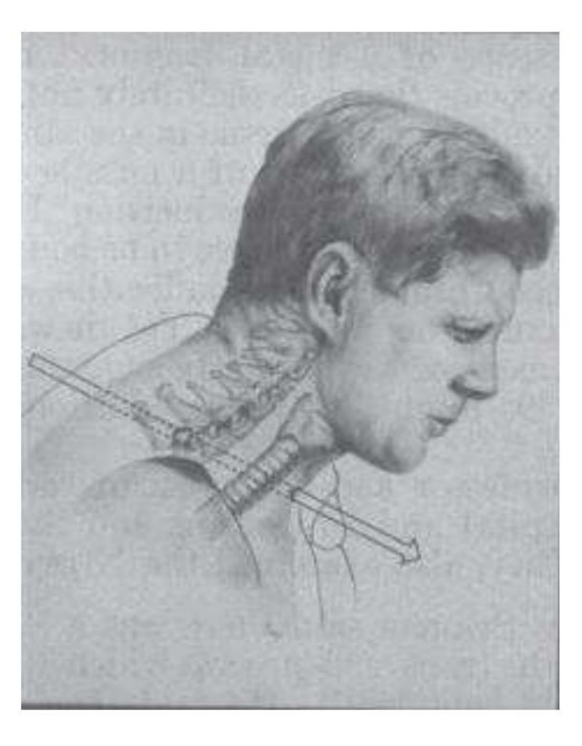
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喉咙伤口



上图为肯尼迪喉咙处的伤口。
"死亡凝视"

"当我从腰部剪开他的裤子时,我站在右侧,发现有一个小的入口伤口,大约 4 到 8 毫米大小。入口伤口明显位于颈部下三分之一处,喉结下方。卡里科医生插入了气管切开管,试图帮助他呼吸。" (查尔斯·克伦肖医生,帕克兰医院外科医生)



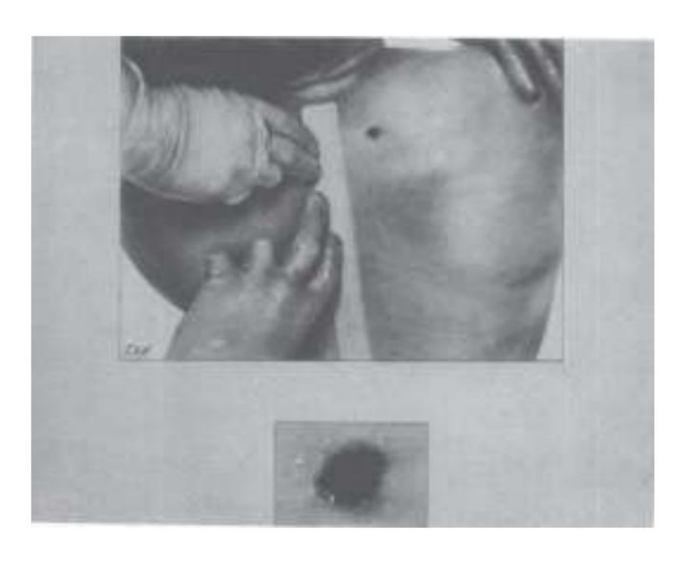
上图为肯尼迪总统颈部和胸部的横截面医学绘图,显示了子弹从背部射向喉咙的可能轨迹

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图纸



上图为美国总统约翰·肯尼迪头部后部伤口的图画。
上面的手握住了他的一部分头皮。
由医学插画家 Ida G. Dox 根据尸检照片制作



上图为约翰·F·肯尼迪的后胸廓图画，显示了上背部入口伤口的大致位置和外观。
这幅画是由医学插画家 Ida G. Dox 根据尸检照片绘制的，

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未经证实/掩盖/篡改的照片 - 疑问……阴谋?

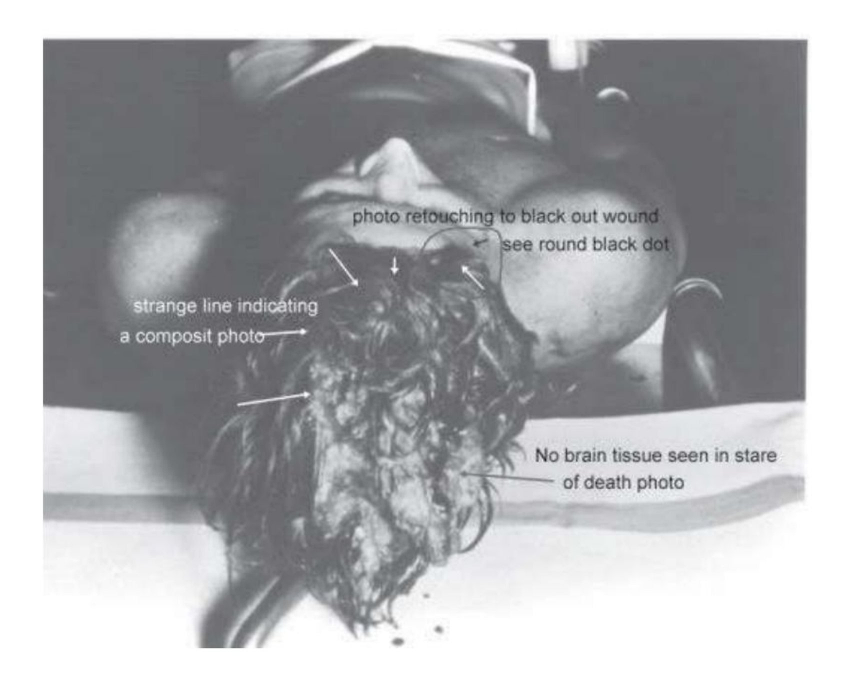
照片已根据原始资料进行了注释,以突出值得关注的区域。

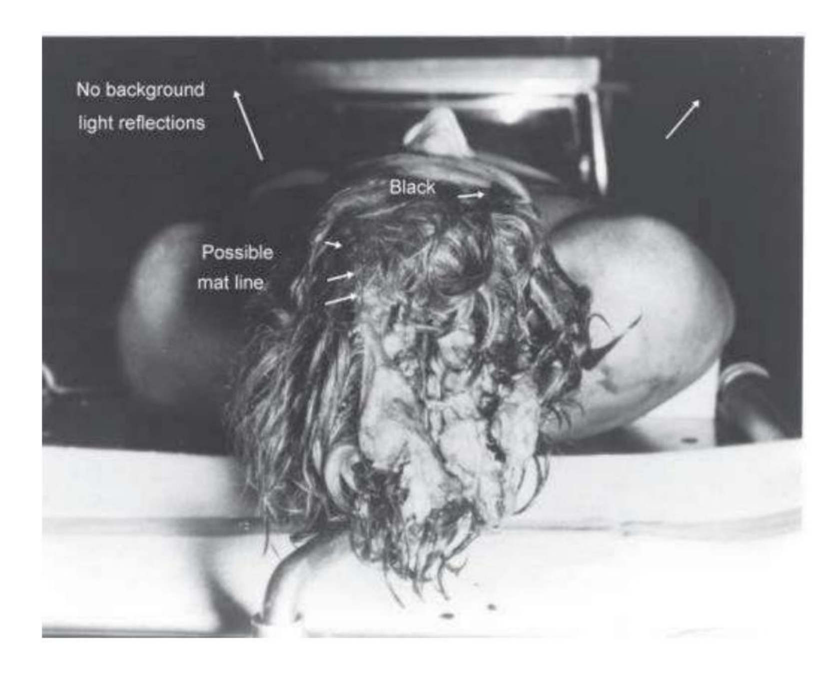
下面的照片是编纂者收到的原样。

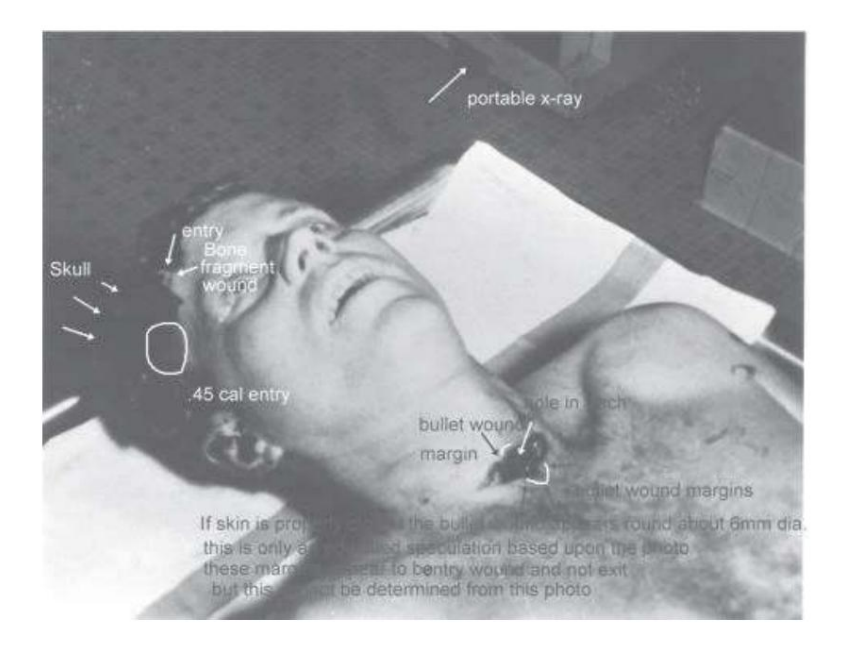
头部外伤

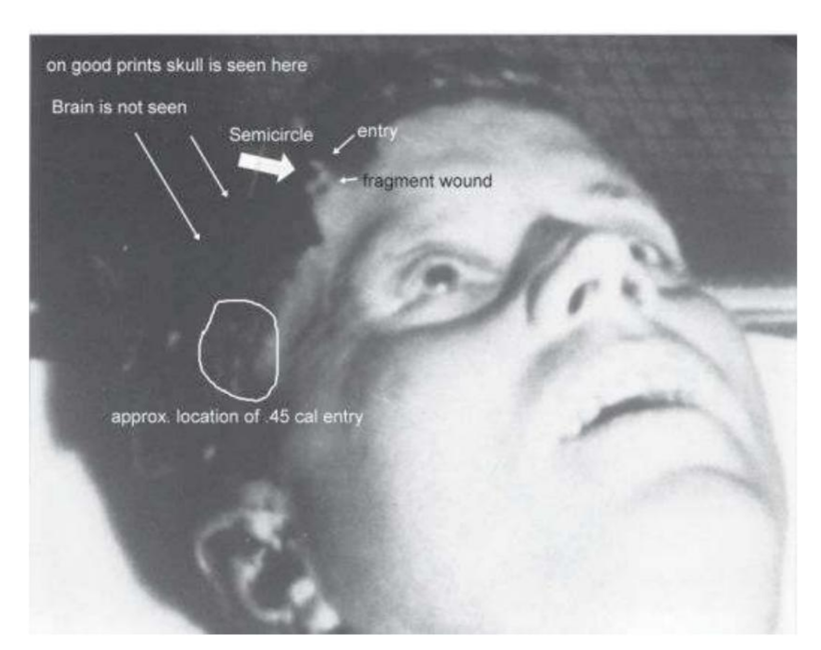




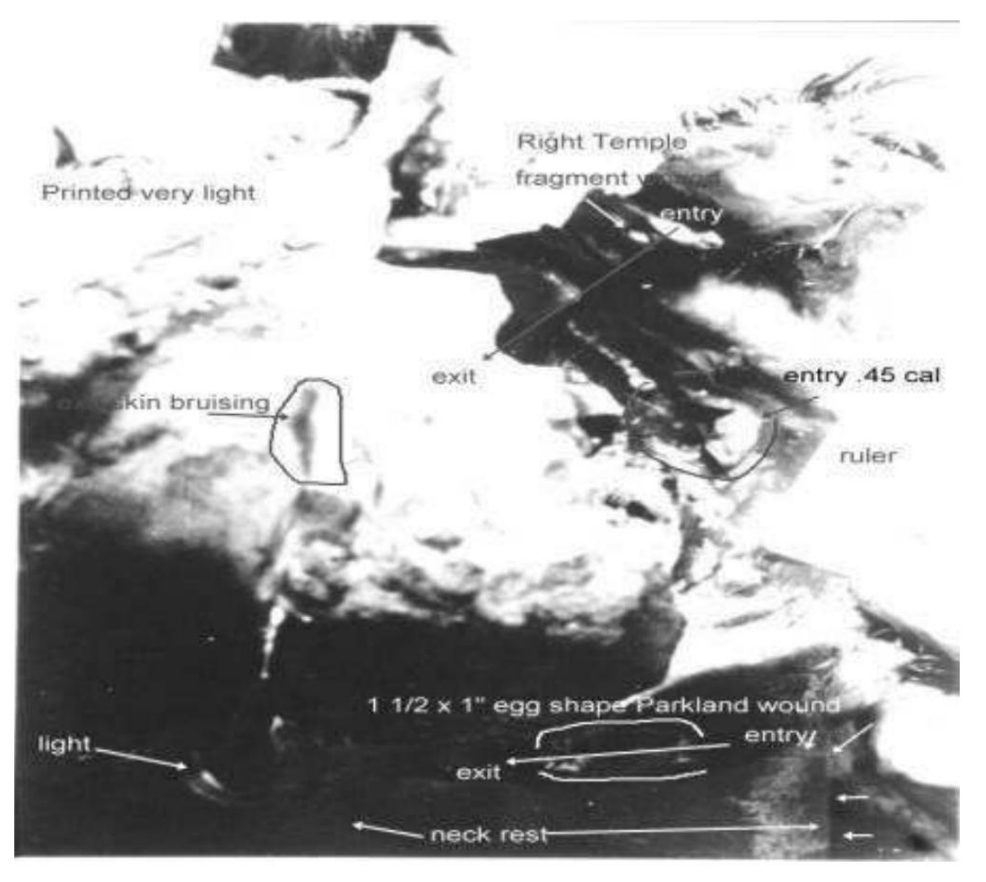

photo retouching to black out wound
see round black dot
strange line indicating
a composit photo
No brain tissue seen in stare
of death photo


No background
light reflections
Black
Possible
mat line

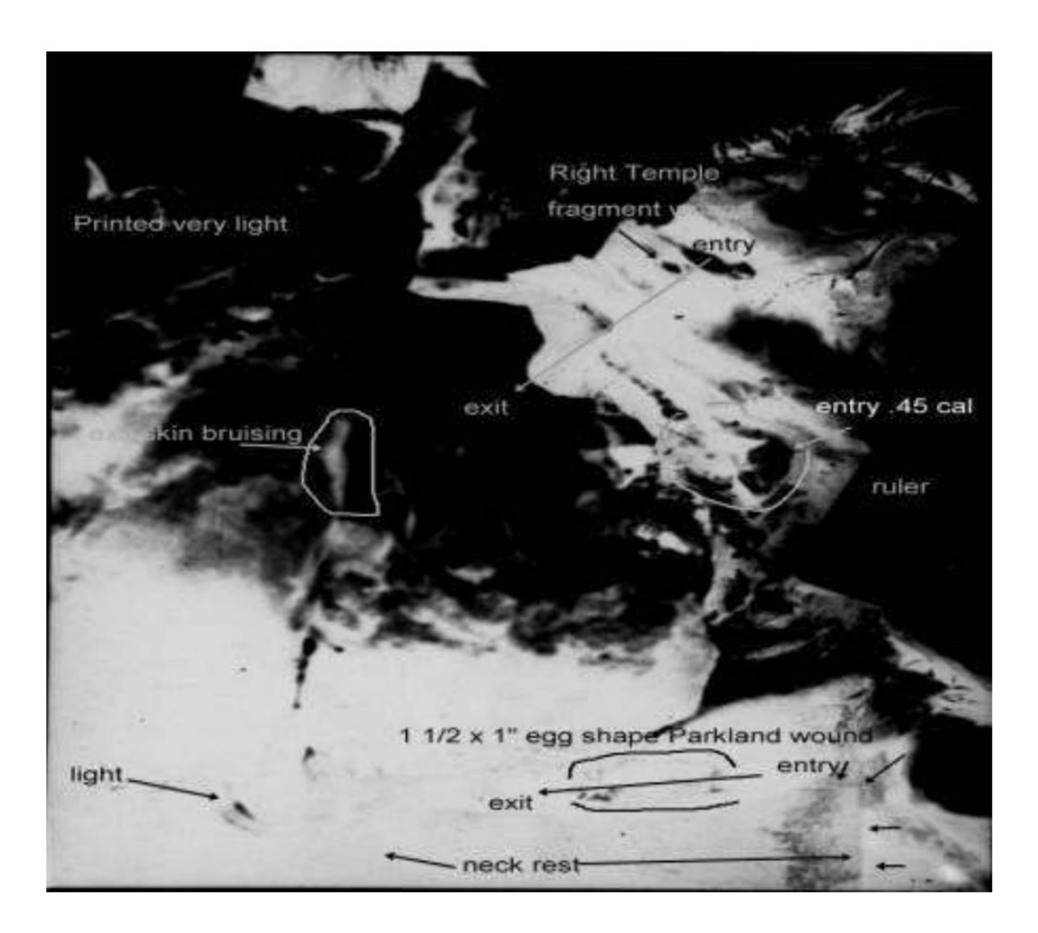

portable x-ray
entry
Bone
fragment
wound
Skull
.45 cal entry
bullet wound
margin


on good prints skull is seen here
Brain is not seen
Semicircle
entry
fragment wound
approx. location of .45 cal entry

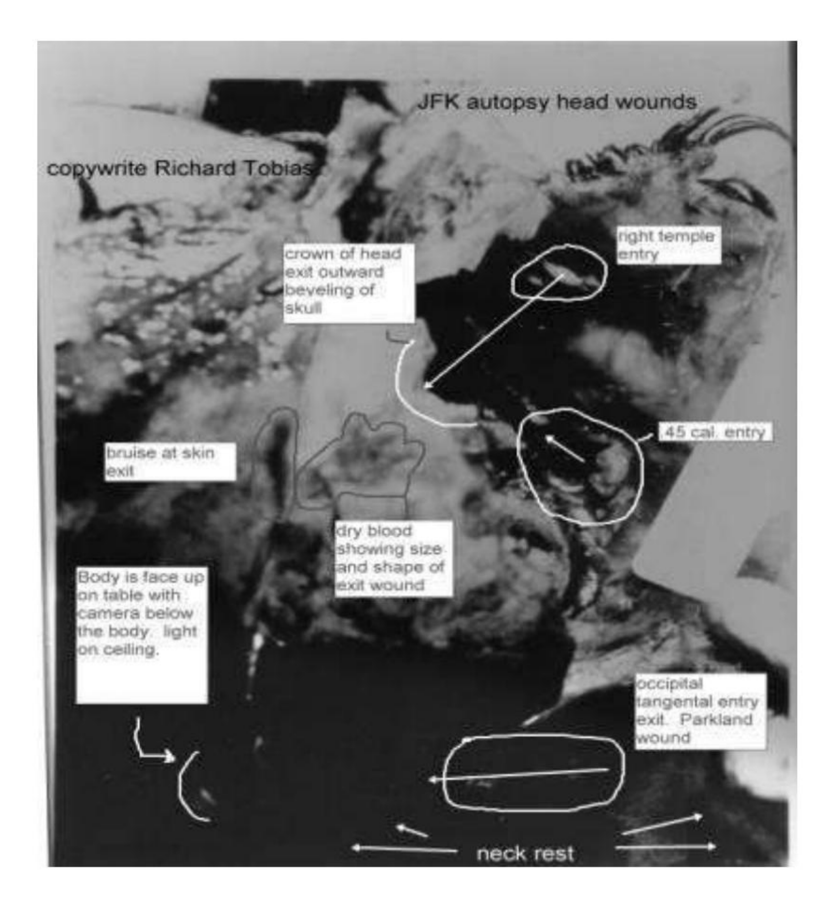

Bone not seen in F1, F8
but seen in F6, F7, G1
?? Semicircle possibly caused by the .45 cal entry???
.45 entry area
Exit
Skin tear?
Entry
Exit
brain
Hair has been blurred to hide wound


Right Temple
fragment
entry
Printed very light
exit
entry .45 cal
skin bruising
ruler
1 1/2 x 1" egg shape Parkland wound
entry
light
exit
neck rest

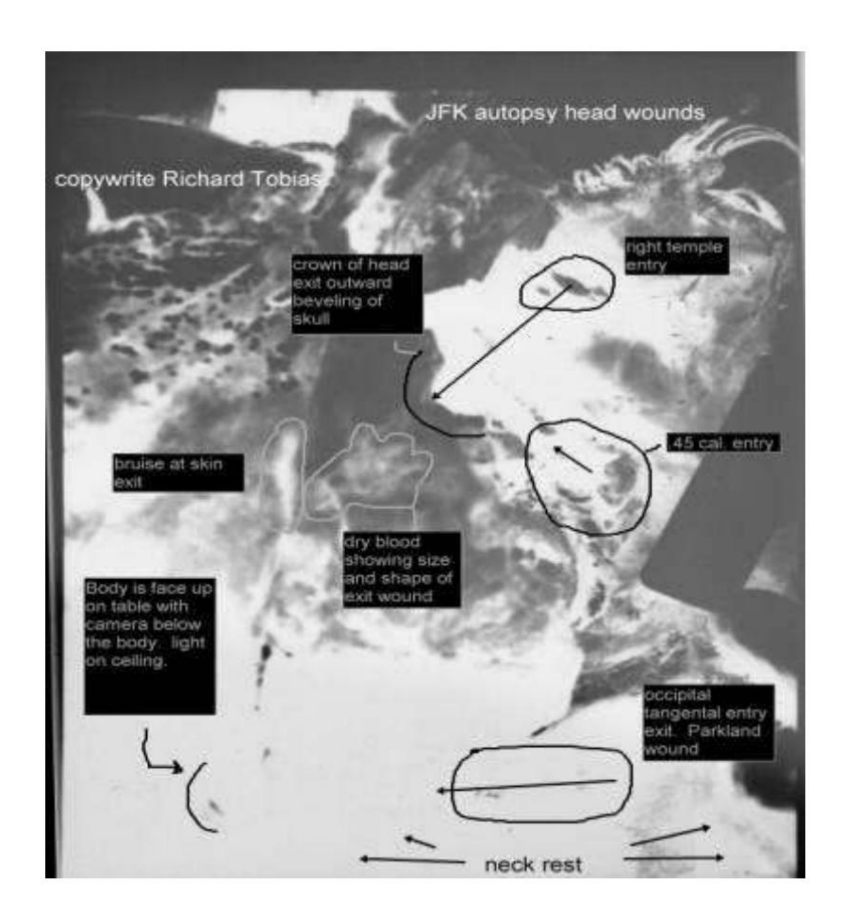
超出正常水平


Right Temple
fragment
entry
Printed very light
exit
entry .45 cal
skin bruising
ruler
1 1/2 x 1" egg shape Parkland wound
entry
light
exit
neck rest

高于 - 负


JFK autopsy head wounds
copywrite Richard Tobias
crown of head exit outward beveling of skull
right temple entry
45 cal. entry
bruise at skin exit
dry blood showing size and shape of exit wound
Body is face up on table with camera below the body. light on ceiling.
occipital tangental entry exit. Parkland wound
neck rest

超出正常水平



高于 - 负

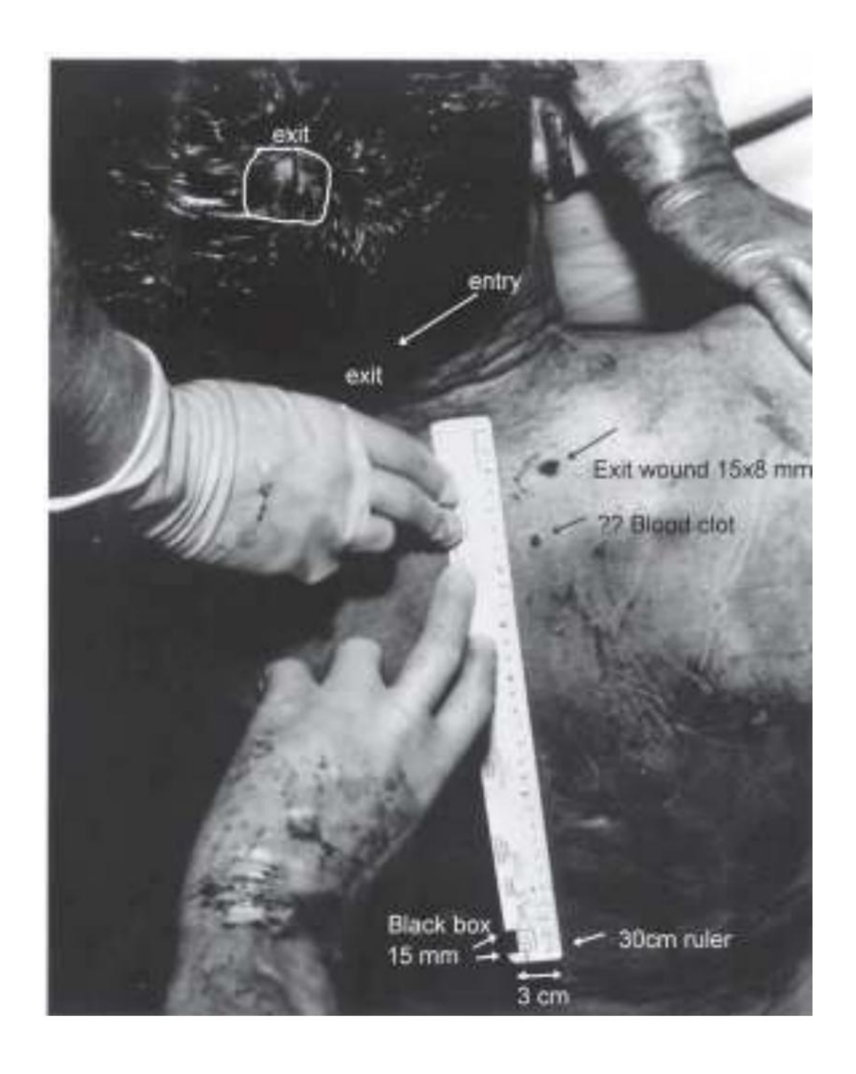


上图 - 请注意医学插画家 Ida G. Dox 绘制的头部与图画中的头部的相似性

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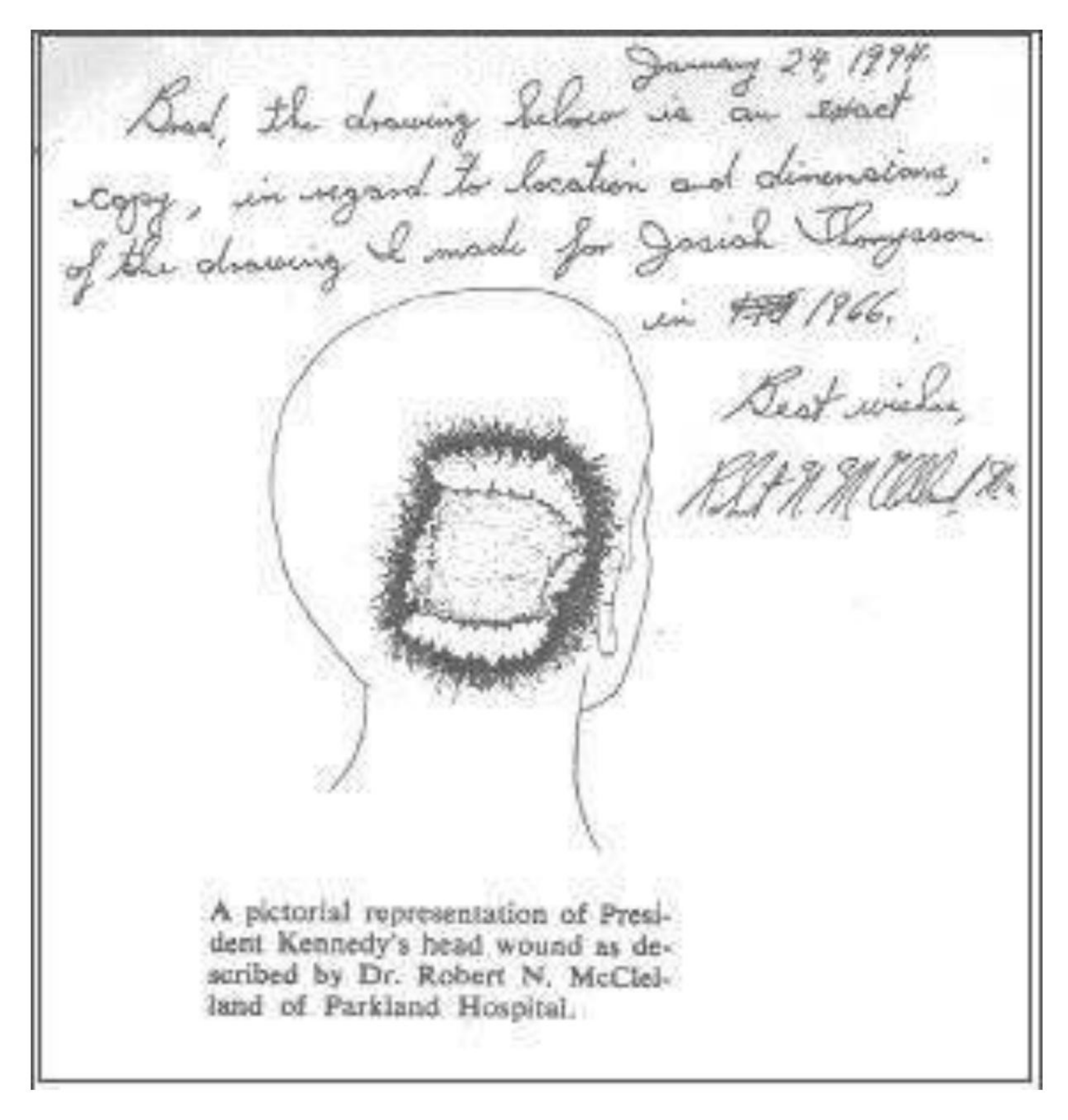
背部伤口





请注意医学插画家 Ida G. Dox 绘制的头部与图画中的头部相似

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A pictorial representation of President Kennedy's head wound as described by Dr. Robert N. McClelland of Parkland Hospital.

David Naro
3779 Knight Rd.
Memphis, TN 38118

Dr. Cyril H. Wecht, M.D.
Dept. of Pathology
St. Francis Central Hospital
1200 Center E. Ave.
Pittsburgh, PA 15219

January 07, 1994

Dr. Wecht:

Confirming our telephone conversation of 01-07-94, I spoke with Dr. Kemp Clark on Wednesday, January 05, 1994. I telephoned Dr. Clark at his office at Parkland Hospital in Dallas to ask some questions regarding the assassination of President John F. Kennedy.

I asked Dr. Clark what the President's head looked like. Dr. Clark said, "The back of the President's head was blown out."

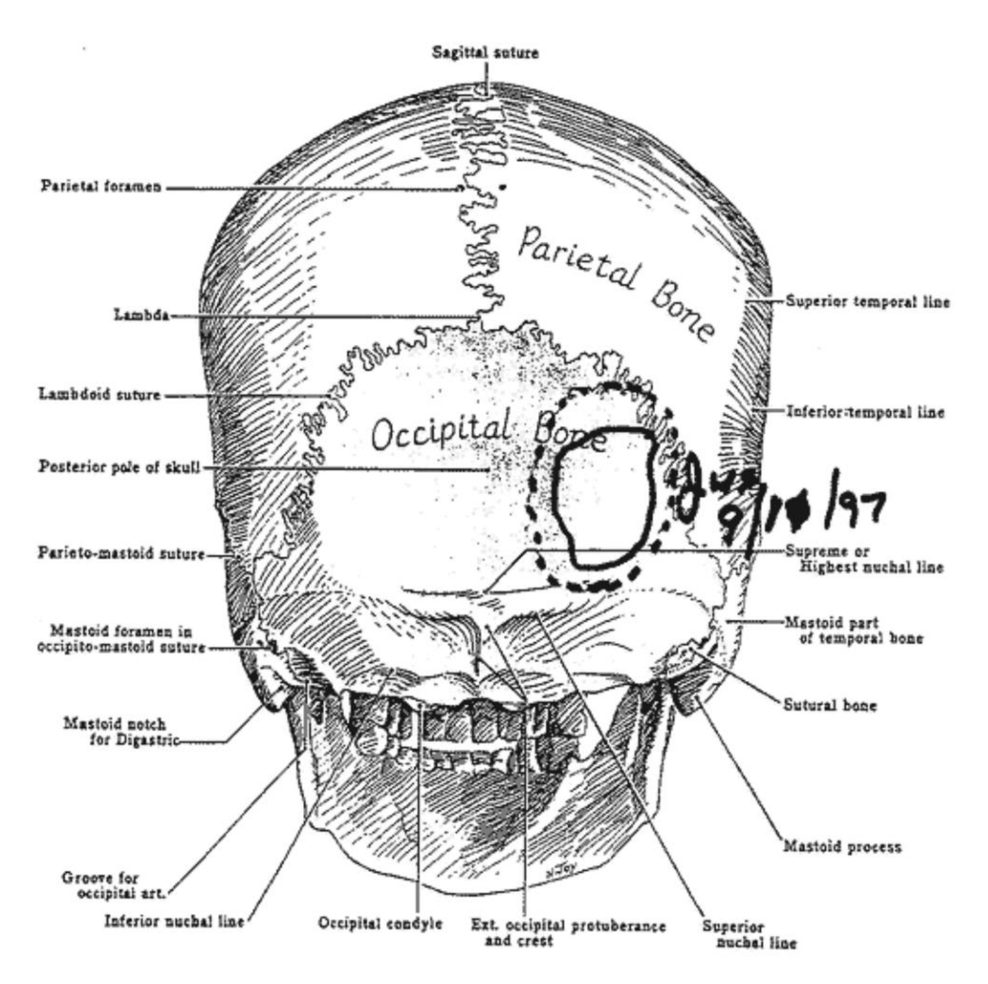
I asked Dr. Clark if the wound in the back of the President's head was an exit or an entry wound. Dr. Clark's response was, "In my opinion the wound was an exit wound."

As we discussed, I am willing to testify regarding my telephone conversation with Dr. Clark.

Yours truly,

David Naro

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7-9 SKULL FROM BEHIND (NORMA OCCIPITALIS)

Observe:

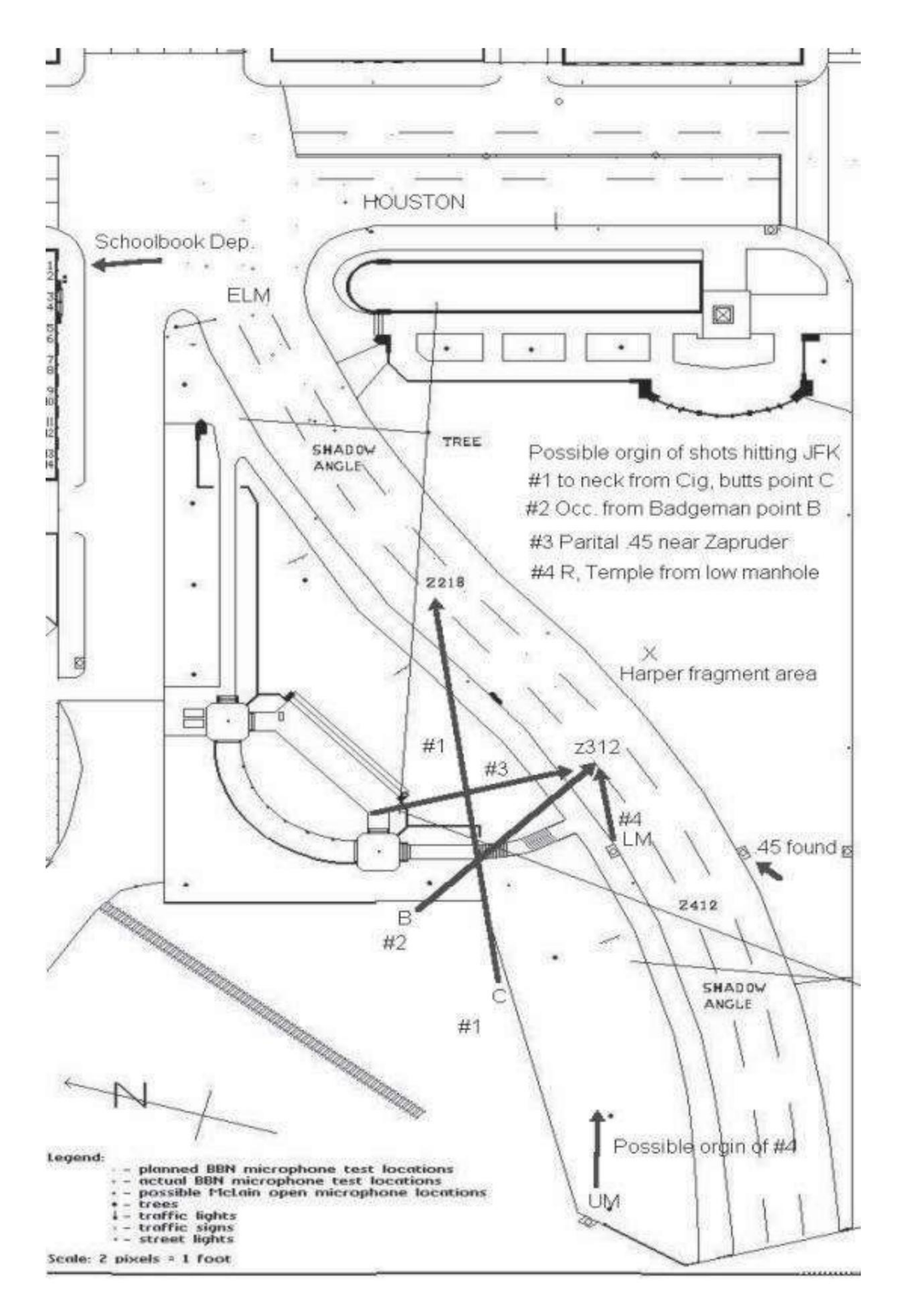
1. The outline is horseshoe-shaped from the tip of one mastoid process over the vertex to the tip of the other.
2. At the base of the skull, the outline is nearly straight from one mastoid process to the other, except where the occipital condyles project downward. On each side, it crosses two grooves (for the origin of the posterior belly of Digastric laterally, and for the occipital artery medially). Between the condyles is the foramen magnum.
3. The surface is convex. Near the center is the lambda. From it a triradiate suture runs: the sagittal (interparietal) upward in the median plane, and the lambdoid (parietooccipital) inferolaterally to the blunt postero-inferior angles of the parietal bones where it bifurcates.
4. On each side are two inconstant foramina for emissary veins and meningeal arteries: parietal and mastoid foramina.
5. Midway between lambda and foramen magnum is the external occipital protuberance or inion. From it the superior nuchal line curves laterally and crosses the lateral aspect of the mastoid, dividing it into a smooth upper and a rough lower part.
6. The surface below the superior nuchal line is the nuc[redacted] nucha.

MD 188 **001540** -

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其他可能的射击来源

其它理论则认为,枪声可能来自教科书仓库以外的地方。


HOUSTON
Schoolbook Dep.
ELM
SHADOW ANGLE
TREE
Possible orgin of shots hitting JFK
#1 to neck from Cig, butts point C
#2 Occ. from Badgeman point B
#3 Parital .45 near Zapruder
#4 R, Temple from low manhole
Z218
X
Harper fragment area
#1
z312
#3
#4
LM
.45 found
B
#2
Z412
C
SHADOW ANGLE
#1
N
Possible orgin of #4
UM
Legend:
- planned BBN microphone test locations
- actual BBN microphone test locations
- possible Mclain open microphone locations
- trees
- traffic lights
- traffic signs
- street lights
Scale: 2 pixels = 1 foot

结尾

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http://campbellmgold.com

15122010